# CAMPAIGN FINANCIAL REPORT

*(All of the information in this report is public information)*

Name of candidate, committee or corporation James Ravnikar

Office sought or ballot question Beltrami County Commissioner District 2

Type of report
- X Candidate report
- ___ Campaign committee report
- ___ Association or corporation report
- ___ Final report

Period of time covered by report:

from 5/26/22 to 7/25/22

## CONTRIBUTIONS RECEIVED

Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded $100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH $ Ø

IN-KIND + $ Ø

TOTAL AMOUNT RECEIVED = $ Ø

TOTAL CASH-ON-HAND $ Ø

## DISBURSEMENTS

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

| Date | Purpose | Amount |
|---|---|---|
| 5/26/22 | Filing Fee | $50.00 |
| | | |
| | | |
| | | |
| | TOTAL | $50.00 |

## CORPORATE PROJECT EXPENDITURES

Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than $200. Submit a separate report for each project. Attach additional sheets if necessary.

Project title or description N/A

| Date | Purpose | Name and Address of Recipient | Expenditure or Contribution Amount |
|---|---|---|---|
| | N/A | | |
| | | | |
| | | TOTAL | |

I certify that this is a full and true statement. [signature] Signature 7/25/22 Date

Printed Name James Ravnikar Telephone 218-780-6253 Email (if available) ___

Address 616 Robin LN SW Bemidji, MN 56601

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